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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA	=	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Justin First name Talbott Middle name Powell Last name and Suffix (Sr., Jr., II, III)	Sharon First name Snell Middle name Powell Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		PKA Sharon Snell
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-6474	xxx-xx-0400

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Debtor 1 **Justin Talbott Powell**Debtor 2 **Sharon Snell Powell**

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EINs	EINs			
5.	Where you live	516 Archer Place	If Debtor 2 lives at a different address:			
		Chesapeake, VA 23322 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Chesapeake City				
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)			

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Deb	otor 2 Sharon Snell Pow	ell	Case number (if known)				
Par	t 2: Tell the Court About	Your Bankruptcy C	ase				
7.	The chapter of the Bankruptcy Code you are				2(b) for Individuals Filing for Bankruptcy		
	choosing to file under	☐ Chapter 7					
		☐ Chapter 11					
		☐ Chapter 12					
		Chapter 13					
8.	How you will pay the fee	about how you	pter 12 pter 13 will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details bout how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money rider. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with pre-printed address. need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay the Filing Fee in Installments (Official Form 103A). request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, ut is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line hat applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill ut the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. District				
	☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Inc. The Filing Fee in Installments (Official Form 103A).						
		-	· · ·		e filing for Chapter 7. By law, a judge may,		
		that applies	to your family size and you are unable	to pay the fee in installmer	nts). If you choose this option, you must fill		
_							
9.	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
		District	When	C	case number		
10	Are any bankruptcy						
	cases pending or being	■ No					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
		Debtor			elationship to you		
		District	When		ase number, if known		
		Debtor			elationship to you		
		District	When	Ca	ase number, if known		
11.	Do you rent your	■ No. Go to	line 12.				
	residence?	■ INO.	our landlord obtained an eviction judge	ment against you?			
		Yes. Has yo	No. Go to line 12.	none against you:			
			110. 00 10 1110 12.				

bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

Justin Talbott Powell

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Debtor 1 Justin Talbott Powell

Deb	otor 2 Sharon Snell Pow	/ell			Case number (if known)		
Par	t 3: Report About Any Bu	sinesses	You Owr	ı as a Sole Proprie	tor		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	e and location of bus	iness		
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Sta	te & ZIP Code		
	it to this petition.		Chec	k the appropriate bo	x to describe your business:		
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as d	efined in 11 U.S.C. § 101(53A))		
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).				
	For a definition of <i>small</i>	■ No.	I am	not filing under Chap	oter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t		11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am	iling under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	r Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	Number Street City State 9 7in Code		
					Number, Street, City, State & Zip Code		

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Debtor 1 Justin Talbott Powell
Debtor 2 Sharon Snell Powell

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case 18-70324-FJS Desc Main Page 6 of 59 Document Debtor 1 **Justin Talbott Powell Sharon Snell Powell** Debtor 2 Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16a. individual primarily for a personal, family, or household purpose." you have? ■ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ■ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative ☐ Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ☐ No are paid that funds will ☐ Yes be available for distribution to unsecured creditors? 18. How many Creditors do **1.000-5.000 25.001-50.000** 1-49 you estimate that you □ 5001-10,000 **5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ■ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$0 - \$50.000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1.000.000.001 - \$10 billion be worth? □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

> /s/ Sharon Snell Powell /s/ Justin Talbott Powell **Sharon Snell Powell Justin Talbott Powell** Signature of Debtor 1 Signature of Debtor 2

Executed on February 2, 2018 MM / DD / YYYY

Executed on February 2, 2018

MM / DD / YYYY

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Justin Talbott Powell

Debtor 1 Justin Talbott Powell

Debtor 2 Sharon Snell Powell

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Dana S. Power	Date	February 2, 2018
Signature of Attorney for Debtor	_	MM / DD / YYYY
Dana S. Power 33101 Printed name		
Harbour Law, P.L.C		
500 E. Main St. Suite 1230		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	
33101 Bar number & State		<u> </u>

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		Docume	ent Pade 8 of 59	
Fill in this infor	mation to identify your	case:		
Debtor 1	Justin Talbott Po	well		
	First Name	Middle Name	Last Name	
Debtor 2	Sharon Snell Pov	vell		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	PF VIRGINIA	
Case number _ (if known)				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

-			
Par	1: Summarize Your Assets		
			ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	282,195.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	76,857.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	359,052.00
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	325,569.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,552.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	12,423.00
	Your total liabilities	\$	339,544.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	8,657.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	6,161.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other s	chedules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	l, family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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		Document	Page 9 of 59	
Debtor 1	Justin Talbott Powell		9	

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Debtor 2 Sharon Snell Powell

	Total clain	1
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,552.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	8,012.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	9,564.00

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Filli	n this inform	ation to identif	y your case and t			1 440 10 01 00			
Debt	tor 1	Justin Talb	ott Powell						
		First Name		e Name		Last Name			
	tor 2	Sharon Sne							
(Spou	se, if filing)	First Name	Middle	e Name		Last Name			
Unite	ed States Bar	kruptcy Court fo	or the: EASTERN	DISTR	ICT OF VIRGIN	IIA			
Case	e number								Check if this is an amended filing
Sc n eac t fits	hedule th category, se best. Be as co	mplete and accur	roperty lescribe items. List a rate as possible. If tw	o marrie	ed people are filir	asset fits in more than one ng together, both are equall ional pages, write your nan	y responsible for supply	ing correc	t information. If
_	No. Go to Part Yes. Where is			Wha	t is the property?	Check all that apply			
	516 Archer	Place		_	Single-family ho		Do not deduct secured	I claims or	exemptions Put the
-	Street address, if	available, or other de	escription		Duplex or multi-	-unit building	amount of any secured Creditors Who Have C	d claims on	Schedule D:
	Chesapeal		23322-0000		Land		Current value of the entire property?	porti	ent value of the
	City	State	ZIP Code			perty	\$282,195.00	<u> </u>	\$282,195.00
							Describe the nature of (such as fee simple, to		
				Who	has an interest i	n the property? Check one	a life estate), if know		, ,
							Tenants by the E	Entirety	
	Chesapeak	ce City							
	County					,	Check if this is o	ommunity	property
				045-0	71110001011001	the debtors and another	(see instructions)		
					er information you erty identification	u wish to add about this ite n number:	ii, such as local		

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$282,195.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Zillow value provided

Official Form 106A/B Schedule A/B: Property page 1

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Debte Debte	_	ustin Talbott Pov haron Snell Pow			Case number (if known)	
3. Ca	rs, vans,	trucks, tractors, s	port utility ve	ehicles, motorcycles		
	No					
	Yes					
	. 00					
3.1	Make:	Volkswagon		Who has an interest in the property? Check one		red claims or exemptions. Put
0.1	Model:	Passat Wagon		Debtor 1 only		ecured claims on Schedule D: e Claims Secured by Property.
	Year:	2008		■ Debtor 2 only		
		nate mileage:	133,000	■ Debtor 2 only □ Debtor 1 and Debtor 2 only	Current value of th entire property?	e Current value of the portion you own?
		ormation:	133,000	☐ At least one of the debtors and another	entire property:	portion you own:
		omaton.		At least one of the debtors and another		
				Check if this is community property (see instructions)	\$1,200 .	91,200.00
3.2	Make:	Toyota		Who has an interest in the property? Check one	Do not deduct secu	red claims or exemptions. Put
3.2		Tundra		<u> </u>		ecured claims on Schedule D:
	Model:	2007		■ Debtor 1 only		e Claims Secured by Property.
	Year:	ate mileage:	174,000	Debtor 2 only	Current value of th entire property?	e Current value of the portion you own?
		formation:	174,000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property:	portion you own:
	Other iiii	omation.		At least one of the deptors and another		
				Check if this is community property (see instructions)	\$5,225 .	\$5,225.00
3.3	Make:	Toyota		Who has an interest in the property? Check one	Do not deduct secu	red claims or exemptions. Put
0.0		Highlander		_		ecured claims on Schedule D: e Claims Secured by Property.
	Model: Year:	2008		■ Debtor 1 only	Creditors Who have	Gairns Secured by Property.
		nate mileage:	85,000	Debtor 2 only	Current value of th entire property?	e Current value of the portion you own?
		ormation:	03,000	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	chare property.	portion you own:
	0			At least one of the deptors and another		
				☐ Check if this is community property	\$8,275.	00 \$8,275.00
				(see instructions)	-	<u> </u>
	<i>mples:</i> B No			nd other recreational vehicles, other vehicles atercraft, fishing vessels, snowmobiles, motorcy		
.pa	iges you	have attached for	Part 2. Write	vn for all of your entries from Part 2, includin that number here		\$14,700.00
Part 3		be Your Personal and				
Do y	ou own o	or have any legal o	r equitable in	terest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E		goods and furnish Major appliances, fu		s, china, kitchenware		
		.coribo				

Yes. Describe.....

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L	Snaron Sne	POWEII Case number (if known)	
		Household goods and furnishings: 2 sofas, coffee table, end tables, 3 beds, 4 chest of drawers, 2 dining tables, 10 dining chairs, buffet,10 pictures, 5 fans, 3 rugs, 4 lamps, washing machine, dryer, vacuum cleaner, refrigerator, stove, microwave, small kitchen appliances, dishes, pots and pans, silverware, patio furniture, grill, lawnmower, tools, weedeater	\$3,956.00
7.		and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music II phones, cameras, media players, games	collections; electronic devices
		2 Computers, radio, dvd player, 4 tv's	\$1,000.00
8.		d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coi ions, memorabilia, collectibles	n, or baseball card collections;
9.	Equipment for sports a Examples: Sports, phot musical inst ☐ No ☐ Yes. Describe	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
		sports equipment	\$200.00
11	No ☐ Yes. Describe Clothes Examples: Everyday of No ☐ Yes. Describe	es, shotguns, ammunition, and related equipment elothes, furs, leather coats, designer wear, shoes, accessories ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
		wedding and engagement rings	\$500.00
_		wedding and engagement rings	\$2,500.00
13	B. Non-farm animals Examples: Dogs, cats No Yes. Describe	, birds, horses	
	100. D0301D0	cat	\$10.00
		out	Ψ10.00

page 3 Official Form 106A/B Schedule A/B: Property

Debtor 1

		Case 18-70	0324-FJS	Doc 1		Entered 02/02/18 17:09:05 age 13 of 59	Desc Main
	btor 1 btor 2	Justin Talb Sharon Sno				Case number (if known)	
I	■ No	other personal a		items you d	id not already list, inclu	ding any health aids you did not list	
15.					n Part 3, including any e	entries for pages you have attached	\$8,166.00
		Describe Your Fina					
Do	you o	own or have any	legal or equita	able interest	in any of the following	?	Current value of the portion you own? Do not deduct secured claims or exemptions.
ļ	□ No	mples: Money you			home, in a safe deposit	box, and on hand when you file your petition	on
						Cash	\$20.00
					nts with the same institut		nouses, and other similar
١	Yes	S			Institution name		
			17.1. Ch	ecking	BB&T checki Debtor 2's m	ing account #9528 (joint with other)	\$3,392.00
			17.2.			credit account #8116 (overdraft ith 0 balance)	\$0.00
			17.3.		BB&T saving	s account #0846	\$3,740.00
			17.4.		BB&T saving	s account #5030	\$23.00
			17.5.		NFCU saving	s account #8926	\$5.00
			17.6.		ILA Federal (Credit Union checking account	\$2,167.00
18.		is, mutual funds			brokerage firms, money	market accounts	
	■ No	S		tution or issu			
	and	publicly traded : joint venture	stock and inter	ests in inco	rporated and unincorpo	orated businesses, including an interes	t in an LLC, partnership,
	■ No □ Yes	s. Give specific i	nformation abou Name of			% of ownership:	
20.	Gove	ernment and cor	porate bonds a	and other ne	gotiable and non-nego	tiable instruments	

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

	Case 18-703	324-FJS	Doc 1		Entered 02/02/18 17:09:05 age 14 of 59	Desc Main
Debtor 1 Debtor 2					Case number (if known)	
- N.						
■ No	o es. Give specific info	rmation about	them			
— 10	ss. Give specific fillo	Issuer na				
. . .						
	•		eogh, 401(k	s), 403(b), thrift savings a	ccounts, or other pension or profit-sharing p	blans
	es. List each accoun	t senarately				
	o. List caon accoun	Type of acc	count:	Institution nam	e:	
				HRSA-ILA 40	01(k)	\$24,755.00
				VALIO 400//-		* 2.047.00
				VALIC 403(b)	\$3,847.00
				VRS accoun	t	\$4,942.00
				<u></u>		
You		d deposits you	ı have made		e service or use from a company c, gas, water), telecommunications compan	ies, or others
■ No						
□ Ye	es			Institution nam	e or individual:	
23. Ann	uities (A contract fo	r a periodic pa	ayment of m	oney to you, either for life	e or for a number of years)	
■ No	_					
☐ Ye	es lss	uer name and	d description	٦.		
	.S.C. §§ 530(b)(1), 5			a qualified ABLE progra	am, or under a qualified state tuition pro	gram.
		titution name	and descrip	otion. Separately file the r	ecords of any interests.11 U.S.C. § 521(c):	
25. Trus		ure interests	in property	y (other than anything li	sted in line 1), and rights or powers exe	cisable for your benefit
	es. Give specific info	ormation abou	it them			
	·					
				rest in inheritance, lo ty settlement	ttery, insurance proceeds,	Unknown
	amples: Internet dom			, and other intellectual ceeds from royalties and		
□ Ye	es. Give specific info	ormation abou	it them			
_Exa	,				oldings, liquor licenses, professional license	es
■ No	o es. Give specific info	ormation abou	it them			
Money	or property owed to	o you?				Current value of the
						portion you own?Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 5

	Case 18-70324-FJS	Doc 1	Filed 02/02/18 Document Pa	Entered 02 age 15 of 59	2/02/18 17:09:05	Desc Main
Debtor 1 Debtor 2	Justin Talbott Powell Sharon Snell Powell				Case number (if known)	
28. Tax re	efunds owed to you					
■ Yes	. Give specific information abou	t them, inclu	ding whether you already	filed the returns a	nd the tax years	
			st in any and all tax re cluding the 2017 Tax			\$1,100.00
Exam ■ No	y support nples: Past due or lump sum alir s. Give specific information	nony, spous	al support, child support, i	maintenance, divo	rce settlement, property s	settlement
Exan	amounts someone owes you nples: Unpaid wages, disability in benefits; unpaid loans you. Give specific information			, sick pay, vacatio	n pay, workers' compens	sation, Social Security
		Interest i	n earned and unpaid	sick pay/ vacat	ion	\$10,000.00
		Interest i	n earned and unpaid	sick pay/ vacat	ion	\$0.00
		Interest i	n future wages			\$0.00
		Interest i	n future wages			\$0.00
Exan ■ No	ests in insurance policies inples: Health, disability, or life in insurance company Compar	of each polic	cy and list its value.	s); credit, homeow Beneficia		Surrender or refund value:
If you some	nterest in property that is due are the beneficiary of a living treone has died. Give specific information			ance policy, or are	currently entitled to recei	
<i>Exan</i> ■ No	as against third parties, wheth apples: Accidents, employment dies. Describe each claim				for payment	
□ No	contingent and unliquidated	claims of ev	very nature, including co	ounterclaims of th	ne debtor and rights to s	set off claims
- res	s. Describe each claim	Interest i	n any claims			Unknown
35. Any fi	inancial assets you did not alr	eady list				

Official Form 106A/B Schedule A/B: Property page 6

 \square Yes. Give specific information..

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Debtor 1	Justin Talbott Powell	Page 16 of	59	
Debtor 2	Sharon Snell Powell		Case number (if known)	
	the dollar value of all of your entries from Part 4, includi Part 4. Write that number here			\$53,991.00
Part 5: D	escribe Any Business-Related Property You Own or Have an Inter	est In. List any real estat	e in Part 1.	
37. Do yo u	own or have any legal or equitable interest in any business-relate	ed property?		
No. G	Go to Part 6.			
☐ Yes.	Go to line 38.			
	escribe Any Farm- and Commercial Fishing-Related Property You you own or have an interest in farmland, list it in Part 1.	Own or Have an Interest	ln.	
46. Do y o	ou own or have any legal or equitable interest in any farm	- or commercial fishi	ng-related property?	
■ No	o. Go to Part 7.			
☐ Ye	es. Go to line 47.			
Part 7:	Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
	ou have other property of any kind you did not already lise nples: Season tickets, country club membership	t?		
	s. Give specific information			
54. Add	the dollar value of all of your entries from Part 7. Write t	hat number here		\$0.00
Part 8:	List the Totals of Each Part of this Form			
55. Part	1: Total real estate, line 2			\$282,195.00
56. Part	2: Total vehicles, line 5	\$14,700.00		
57. Part	3: Total personal and household items, line 15	\$8,166.00		
58. Part	4: Total financial assets, line 36	\$53,991.00		
59. Part	5: Total business-related property, line 45	\$0.00		
60. Part	6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part	7: Total other property not listed, line 54	\$0.00		
62. Tota	al personal property. Add lines 56 through 61	\$76,857.00	Copy personal property total	\$76,857.00
63. Tota	al of all property on Schedule A/B. Add line 55 + line 62			\$359,052.00

Official Form 106A/B Schedule A/B: Property page 7

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		Doddino	THE TAGE AT OF	70	
Fill in this infor	mation to identify your	case:			
Debtor 1	Justin Talbott Po	well			
	First Name	Middle Name	Last Name	_	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name	-	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Case number					_ 0
(if known)					Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

	n of the property and line on nat lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
23322 Ches	Place Chesapeake, VA apeake City County	\$282,195.00	•	\$1.00	Va. Code Ann. § 55-20.2; Va. Code Ann. § 55-37
Zillow value Line from Sche				100% of fair market value, up to any applicable statutory limit	
2007 Toyota	Tundra 174,000 miles	\$5,225.00		\$5,225.00	Va. Code Ann. § 34-26(8)
Line nom som	edule AVD. 3.2			100% of fair market value, up to any applicable statutory limit	
2007 Toyota	Tundra 174,000 miles	\$5,225.00		\$1.00	Va. Code Ann. § 34-4
Line nom con	Saule 74 B. G.E			100% of fair market value, up to any applicable statutory limit	
2008 Toyota	Highlander 85,000 miles	\$8,275.00		\$775.00	Va. Code Ann. § 34-26(8)
Line nem con	Julio 7 V B. GIO			100% of fair market value, up to any applicable statutory limit	
2008 Toyota	Highlander 85,000 miles	\$8,275.00		\$4,688.00	Va. Code Ann. § 34-4
LINE HOIT SCH	Jauro 14 D. 3.3			100% of fair market value, up to	

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		-	90 = 0 0 0 0	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Household goods and furnishings: 2	\$3,956.00		\$1,978.00	Va. Code Ann. § 34-26(4a)
sofas, coffee table, end tables, 3 beds, 4 chest of drawers, 2 dining tables, 10 dining chairs, buffet,10 pictures, 5 fans, 3 rugs, 4 lamps, washing machine, dryer, vacuum cleaner, refrigerator, stove, microwave, small ki Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
2 Computers, radio, dvd player, 4 tv's Line from <i>Schedule A/B</i> : 7.1	\$1,000.00		\$500.00	Va. Code Ann. § 34-26(4a)
Ello II olii ooliodalo / v E. F F F			100% of fair market value, up to any applicable statutory limit	
sports equipment Line from Schedule A/B: 9.1	\$200.00		\$100.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
wedding and engagement rings Line from Schedule A/B: 12.1	\$500.00		\$500.00	Va. Code Ann. § 34-26(1a)
			100% of fair market value, up to any applicable statutory limit	
cat Line from Schedule A/B: 13.1	\$10.00	•	\$5.00	Va. Code Ann. § 34-26(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: BB&T checking account #9528 (joint with Debtor 2's mother)	\$3,392.00		\$200.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
BB&T line of credit account #8116 (overdraft protection with 0 balance)	\$0.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
BB&T savings account #0846 Line from Schedule A/B: 17.3	\$3,740.00		\$1.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
BB&T savings account #5030 Line from Schedule A/B: 17.4	\$23.00		\$1.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
ILA Federal Credit Union checking account	\$2,167.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 17.6			100% of fair market value, up to any applicable statutory limit	
HRSA-ILA 401(k) Line from Schedule A/B: 21.1	\$24,755.00	•	\$24,755.00	Va. Code Ann. § 34-34
			100% of fair market value, up to any applicable statutory limit	

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	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	HRSA-ILA 401(k) Line from Schedule A/B: 21.1	\$24,755.00		\$1.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	HRSA-ILA 401(k) Line from Schedule A/B: 21.1	\$24,755.00		\$1.00	112 S Ct. 2242
				100% of fair market value, up to any applicable statutory limit	
	Potential interest in inheritance, lottery, insurance proceeds, and/or	Unknown		\$1.00	Va. Code Ann. § 34-4
	property settlement Line from Schedule A/B: 25.1			100% of fair market value, up to any applicable statutory limit	
	Interest in any and all tax refunds including the 2017 Tax Refund	\$1,100.00		\$1.00	Va. Code Ann. § 34-4
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Interest in any and all tax refunds including the 2017 Tax Refund	\$1,100.00		\$500.00	Va. Code Ann. § 34-26(9)
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Interest in earned and unpaid sick pay/ vacation	\$10,000.00		\$1.00	Va. Code Ann. § 34-4
	Line from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	
	Interest in future wages Line from Schedule A/B: 30.4	\$0.00		\$1.00	Va. Code Ann. § 34-4
	Ellie Holli Osificadio 702. GG14			100% of fair market value, up to any applicable statutory limit	
	Interest in any claims Line from Schedule A/B: 34.1	Unknown		\$1.00	Va. Code Ann. § 34-4
	Zino nom osinodate 702. e 11.			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every			iled on or after the date of adjustme	ent.)
	No	and the other assessment	an to a	OAE days before you fled the	-0
	Yes. Did you acquire the property covered No	ea by the exemption w	ithin 1	,215 days before you filed this case	9?
	☐ Yes				
	- ·				

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Fill in this infor	mation to identify your	case:		
Debtor 1				
	First Name	Middle Name	Last Name	
Debtor 2	Sharon Snell Pov	vell		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number _				D. Ohaal Kilkis is as
(II KNOWN)				Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption.	
ebtor 2 Exemptions 516 Archer Place Chesapeake, VA 23322 Chesapeake City County Zillow value provided	\$282,195.00	■ \$1.00 100% of fair market value, up to	Va. Code Ann. § 55-20.2; Va Code Ann. § 55-37
Line from Schedule A/B: 1.1		any applicable statutory limit	
2008 Volkswagon Passat Wagon 133,000 miles	\$1,200.00	\$1,200.00	Va. Code Ann. § 34-26(8)
Line from Schedule A/B: 3.1		☐ 100% of fair market value, up to any applicable statutory limit	
2008 Volkswagon Passat Wagon 133,000 miles	\$1,200.00	\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 3.1		☐ 100% of fair market value, up to any applicable statutory limit	
Household goods and furnishings: 2 sofas, coffee table, end tables, 3	\$3,956.00	\$1,978.00	Va. Code Ann. § 34-26(4a)
beds, 4 chest of drawers, 2 dining tables, 10 dining chairs, buffet,10 pictures, 5 fans, 3 rugs, 4 lamps, washing machine, dryer, vacuum cleaner, refrigerator, stove, microwave, small ki		□ 100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from	ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
2 Computers, radio, dvd player, 4 tv's	Schedule A/B \$1,000.00	\$500.00	Va. Code Ann. § 34-26(4a)
Line from Schedule A/B: 7.1	Ψ1,500.00	100% of fair market value, up to any applicable statutory limit	
sports equipment	\$200.00	\$100.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 9.1		100% of fair market value, up to any applicable statutory limit	
wedding and engagement rings Line from Schedule A/B: 12.2	\$2,500.00	\$2,500.00	Va. Code Ann. § 34-26(1a)
Ellie Holli Gorioddie 7VD. 1=1=		100% of fair market value, up to any applicable statutory limit	
cat Line from Schedule A/B: 13.1	\$10.00	\$5.00	Va. Code Ann. § 34-26(5)
		100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$20.00	\$20.00	Va. Code Ann. § 34-4
		100% of fair market value, up to any applicable statutory limit	
Checking: BB&T checking account #9528 (joint with Debtor 2's mother)	\$3,392.00	\$1,696.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 17.1		100% of fair market value, up to any applicable statutory limit	
BB&T line of credit account #8116 (overdraft protection with 0 balance)	\$0.00	\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 17.2		100% of fair market value, up to any applicable statutory limit	
BB&T savings account #5030 Line from Schedule A/B: 17.4	\$23.00	\$11.00	Va. Code Ann. § 34-4
		100% of fair market value, up to any applicable statutory limit	
NFCU savings account #8926 Line from Schedule A/B: 17.5	\$5.00	\$5.00	Va. Code Ann. § 34-4
Ellie Holli Govedale / V.E. TTO		100% of fair market value, up to any applicable statutory limit	
VALIC 403(b) Line from Schedule A/B: 21.2	\$3,847.00	\$3,847.00	Va. Code Ann. § 34-34
		100% of fair market value, up to any applicable statutory limit	
VALIC 403(b) Line from Schedule A/B: 21.2	\$3,847.00	\$1.00	112 S Ct. 2242
•		100% of fair market value, up to any applicable statutory limit	
VALIC 403(b) Line from Schedule A/B: 21.2	\$3,847.00	\$1.00	Va. Code Ann. § 34-4
		100% of fair market value, up to any applicable statutory limit	

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Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	VRS account Line from Schedule A/B: 21.3	\$4,942.00		\$4,942.00	Va. Code Ann. §51.1-124.4
	Line from Schedule A/B: 21.3			100% of fair market value, up to any applicable statutory limit	
	VRS account Line from Schedule A/B: 21.3	\$4,942.00		\$1.00	Va. Code Ann. § 34-34
				100% of fair market value, up to any applicable statutory limit	
	VRS account Line from Schedule A/B: 21.3	\$4,942.00		\$1.00	112 S Ct. 2242
				100% of fair market value, up to any applicable statutory limit	
	VRS account Line from Schedule A/B: 21.3	\$4,942.00		\$1.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	Potential interest in inheritance, lottery, insurance proceeds, and/or	Unknown		\$1.00	Va. Code Ann. § 34-4
	property settlement Line from Schedule A/B: 25.1			100% of fair market value, up to any applicable statutory limit	
	Interest in any and all tax refunds including the 2017 Tax Refund	\$1,100.00	•	\$1.00	Va. Code Ann. § 34-4
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Interest in any and all tax refunds including the 2017 Tax Refund	\$1,100.00		\$598.00	Va. Code Ann. § 34-26(9)
	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Interest in earned and unpaid sick pay/ vacation	\$0.00		\$1.00	Va. Code Ann. § 34-4
	Line from Schedule A/B: 30.2			100% of fair market value, up to any applicable statutory limit	
	Interest in future wages Line from Schedule A/B: 30.3	\$0.00		\$1.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
	Interest in any claims Line from Schedule A/B: 34.1	Unknown		\$1.00	Va. Code Ann. § 34-4
				100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No			iled on or after the date of adjustme	ent.)
	Yes. Did you acquire the property covered No Yes	ed by the exemption w	ithin 1	,215 days before you filed this case	9?

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		Document	Page 23	of 59		
Fill in this inforr	nation to identify you	r case:				
Debtor 1	Justin Talbott P	owell				
	First Name	Middle Name	Last Name			
Debtor 2	Sharon Snell Po					
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF VIR	GINIA			
Casa numbar						
Case number (if known)					☐ Check	t if this is an
					_	ded filing
Official Forn	n 106D					
Schedule	D: Creditors	Who Have Claims	Secured	by Property	y	12/15
		two married people are filing togethoumber the entries, and attach it to				
1. Do any creditors	have claims secured by	your property?				
☐ No. Check	this box and submit the	nis form to the court with your other	er schedules. Yo	ou have nothing else	to report on this form.	
■ Yes. Fill in	all of the information	below.				
Part 1: List Al	II Secured Claims					
2. List all secured	claims. If a creditor has m	ore than one secured claim, list the cre	editor separately for	Column A	Column B	Column C
		articular claim, list the other creditors in er according to the creditor's name.	Part 2. As much	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
as possible, list the	ciaims in aiphabelicaí oide	er according to the creditor's name.		value of collateral.	claim	If any
2.1 Seterus, I		Describe the property that secures		\$325,569.00	\$282,195.00	\$43,374.00
Creditor's Name	9	516 Archer Place Chesapea				
Attn: Ban		23322 Chesapeake City Co Zillow value provided	ounty			
Departme P.O. Box		As of the date you file, the claim is:	Check all that			
	CT 06143-1047	apply. Contingent				
	, City, State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as	mortgage or secu	red		
Debtor 2 only		car loan)				
■ Debtor 1 and De	•	☐ Statutory lien (such as tax lien, me	ecnanic's lien)			
☐ Check if this cla	ne debtors and another	☐ Judgment lien from a lawsuit	Mortgage			
community de		Other (including a right to offset)	Mortgage			
Date debt was incu	urred	Last 4 digits of account num	ber <u>8157</u>			
Add the dollar va	lue of your entries in Co	lumn A on this page. Write that num	ber here:	\$325,56	9.00	
		he dollar value totals from all pages.		\$325,56	9.00	
Write that number	a nere.					
Part 2: List Oth	ners to Be Notified fo	r a Debt That You Already Listed	d			
to collect from you	for a debt you owe to so the debts that you listed	notified about your bankruptcy for a omeone else, list the creditor in Part in Part 1, list the additional creditors	1, and then list th	e collection agency he	re. Similarly, if you have	more than one
	_					
	ber, Street, City, State & Z w Group, LLC	ip Code	On which	n line in Part 1 did you er	nter the creditor? 2.1	
	ee Chopt Rd		Last 4 die	gits of account number		
Ste 240			Edot rui		<u> </u>	
Richmon	d, VA 23229					

Official Form 106D

	Case	18-70324-FJS D	oc 1 Filed 02/ Documen		Entered 24 of 5	02/02/18 17:0 59)9:05 D	esc Mai	in
Fill	in this inforn	nation to identify your cas		it ruuc	2401				
Del	btor 1	Justin Talbott Powel							
		First Name	Middle Name	Last Nar	ne				
	btor 2	Sharon Snell Powell							
(Spc	ouse if, filing)	First Name	Middle Name	Last Nar	те				
Uni	ited States Bar	nkruptcy Court for the: E	ASTERN DISTRICT OF	VIRGINIA					
Cas	se number								
	nown)						□ C	heck if this	is an
							ar	mended filin	ıg
Ωff	ficial Earm	0.106E/E							
	ficial Form		Llove Unecess	rad Claim				40	14 5
		/F: Creditors Who				THE STATE OF THE PARTY.	NODITY I		2/15
he (num	Continuation Pa ber (if known).	ave Claims Secured by Proper age to this page. If you have no Il of Your PRIORITY Unsec	information to report in a						
1.	Do any credito	rs have priority unsecured cla	ms against you?						
	☐ No. Go to Pa	art 2.							
	Yes.								
2.	identify what typ possible, list the 1. If more than o	priority unsecured claims. If a be of claim it is. If a claim has bo e claims in alphabetical order acc one creditor holds a particular cla tition of each type of claim, see the	th priority and nonpriority and cording to the creditor's name aim, list the other creditors in	nounts, list that one. If you have many notes and notes are the control of the co	claim here and nore than two	d show both priority and	nonpriority am	ounts. As mu	ich as
						Total claim	Priority amount	Nonp amou	riority
2.1	Internal	Revenue Service	Last 4 digits of a	ccount number		\$1,552.00	\$1,552		*** \$0.00
		editor's Name				Ψ1,332.00	Ψ1,552		Ψ0.00
		ized Insolvency Operati	When was the de	ebt incurred?	2014				
	P.O. Bo	x 7346 Iphia, PA 19101-7346							
		treet City State Zlp Code	As of the date yo	u file, the claim	is: Check al	ll that apply			
	Who incurred	the debt? Check one.	☐ Contingent						
	Debtor 1 o	nly	Unliquidated						
	Debtor 2 or	nly	☐ Disputed						
	Debtor 1 a	nd Debtor 2 only	Type of PRIORIT	Y unsecured cl	aim:				
	☐ At least on	e of the debtors and another	☐ Domestic supp	oort obligations					
	☐ Check if th	his claim is for a community of	ebt Taxes and cer	tain other debts	vou owe the	government			
	Is the claim s	ubject to offset?	☐ Claims for dea		-	-			
	■ No		☐ Other. Specify						
	☐ Yes		, ,	Income Ta	axes				
Pai	rt 2: List Al	I of Your NONPRIORITY U	nsecured Claims						
		rs have nonpriority unsecured							
٠.		ve nothing to report in this part. S		with your other	schodulos				
	■ INO. TOU Hav	re noming to report in this part. S	aprilit triio iorill to trie coult	with your others	on icuales.				

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Total claim

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	r 1 Justin Taibott Powell r 2 Sharon Snell Powell		Case number (if know)	
4.1	Capital One	Last 4 digits of account number	9145	\$2,902.00
	Nonpriority Creditor's Name Bankruptcy Claims Servicer P.O. Box 30253	When was the debt incurred?	8/2016	
	Salt Lake City, UT 84130-0253 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	☐ Student loans ☐ Obligations arising out of a separeport as priority claims ☐ Debts to pension or profit-sharin	ration agreement or divorce that you did not	
	Yes	■ Other. Specify Credit Card	• •	
4.2	Dillards Amex Nonpriority Creditor's Name	Last 4 digits of account number	3600	\$1,509.00
	PO Box 71118 Charlotte, NC 28272	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent ☐ Unliquidated		
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Credit Care	• •	
4.3	Navient	Last 4 digits of account number	2775	\$8,012.00
	Nonpriority Creditor's Name P.O. Box 9500 Wilkes Barre, PA 18773	When was the debt incurred?	1994	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent ☐ Unliquidated		
	■ Debtor 2 only□ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
	At least one of the debtors and another	Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify		

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

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Debtor 1 **Justin Talbott Powell** Debtor 2 **Sharon Snell Powell**

Case number (if know)

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
otal claims from Part 1	6b.	Tayon and cortain other debte you awa the government	6b.	Φ.	4 550 00
IIOIII Fait I		Taxes and certain other debts you owe the government		\$	1,552.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	1,552.00
					Total Claim
	6f.	Student loans	6f.	\$	8,012.00
otal claims					
rom Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	4,411.00
	6i.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	12,423.00

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		Booanno	H	
Fill in this infor	mation to identify your	case:		
Debtor 1	Justin Talbott Po	well		
	First Name	Middle Name	Last Name	
Debtor 2	Sharon Snell Pov	vell		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA	
Case number				
(if known)				☐ Check if this is amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

F	Person or	company with Name, Number	whom you have th , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.3	Oity		Oldio	Zii Codo	
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.4	,				
	Name				
	Number	Street			<u></u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>

Case 18-70324-FJS Doc 1 Filed 02/02/18 Entered 02/02/18 17:09:05 Desc Main

Fill in thi		Document	Page 28 of 59	
	is information to identify your	case:		
Debtor 1	Justin Talbott Po	well		
) - l- 1 0	First Name	Middle Name	Last Name	
Debtor 2 Spouse if, f		Middle Name	Last Name	
Jnited St	tates Bankruptcy Court for the:	EASTERN DISTRICT OF VI	RGINIA	
Case nur	mber			
if known)				☐ Check if this is an amended filing
Officia	al Form 106H			
	dule H: Your Cod	ebtors		12/15
eople ar II it out,	re filing together, both are equ	ally responsible for supplying boxes on the left. Attach the	g correct information. If	plete and accurate as possible. If two married more space is needed, copy the Additional Page, page. On the top of any Additional Pages, write
1. Do	o you have any codebtors? (If	you are filing a joint case, do no	ot list either spouse as a c	odebtor.
■ No	-			
	ithin the last 8 years, have you			ommunity property states and territories include and Wisconsin.)
_		,	,,	
	o. Go to line 3. es. Did your spouse, former spo	use or legal equivalent live with	n you at the time?	
	cs. Did your spouse, former spo	use, or legal equivalent live with	i you at the time:	
□ 16				
3. In Co in lir Forn	ne 2 again as a codebtor only i	if that person is a guarantor o	or cosigner. Make sure y	
3. In Co in lir Forn	ne 2 again as a codebtor only i n 106D), Schedule E/F (Officia	if that person is a guarantor o I Form 106E/F), or Schedule C	or cosigner. Make sure y G (Official Form 106G). U	ou have listed the creditor on Schedule D (Official
3. In Co in lir Forn	ne 2 again as a codebtor only in 106D), Schedule E/F (Official ut Column 2. Column 1: Your codebtor	if that person is a guarantor o I Form 106E/F), or Schedule C	or cosigner. Make sure y G (Official Form 106G). U C C C	ou have listed the creditor on Schedule D (Official Jse Schedule D, Schedule E/F, or Schedule G to olumn 2: The creditor to whom you owe the debt
3. In Co in lir Forn fill o	ne 2 again as a codebtor only in 106D), Schedule E/F (Official ut Column 2. Column 1: Your codebtor	if that person is a guarantor o I Form 106E/F), or Schedule C	or cosigner. Make sure y G (Official Form 106G). U C C C	ou have listed the creditor on Schedule D (Official Jse Schedule D, Schedule E/F, or Schedule G to column 2: The creditor to whom you owe the debt heck all schedules that apply:
3. In Co in lir Forn fill o	ne 2 again as a codebtor only in 106D), Schedule E/F (Official out Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guarantor o I Form 106E/F), or Schedule C	or cosigner. Make sure y G (Official Form 106G). U G C C C	ou have listed the creditor on Schedule D (Official Jse Schedule D, Schedule E/F, or Schedule G to column 2: The creditor to whom you owe the debt heck all schedules that apply: Schedule D, line
3. In Co in lir Forn fill o	ne 2 again as a codebtor only in 106D), Schedule E/F (Official out Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guarantor o I Form 106E/F), or Schedule C	or cosigner. Make sure y G (Official Form 106G). U G C C C	olumn 2: The creditor to whom you owe the debt heck all schedules that apply: Schedule D, line Schedule E/F, line
3. In Coin lir Forn fill o	ne 2 again as a codebtor only in 106D), Schedule E/F (Official out Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guarantor of I Form 106E/F), or Schedule C	or cosigner. Make sure y G (Official Form 106G). U	ou have listed the creditor on Schedule D (Official Jse Schedule D, Schedule E/F, or Schedule G to column 2: The creditor to whom you owe the debt heck all schedules that apply: Schedule D, line
3. In Co in lir Forn fill o	ne 2 again as a codebtor only in 106D), Schedule E/F (Official out Column 2. Column 1: Your codebtor Name, Number, Street, City, State and Z	if that person is a guarantor of I Form 106E/F), or Schedule C	or cosigner. Make sure y G (Official Form 106G). L	ou have listed the creditor on Schedule D (Official Jse Schedule D, Schedule E/F, or Schedule G to solumn 2: The creditor to whom you owe the debt heck all schedules that apply: Schedule D, line

Street

State

Number

City

ZIP Code

Fill in this informat	tion to identify your case:	
Debtor 1	Justin Talbott Powell	
Debtor 2 (Spouse, if filing)	Sharon Snell Powell	
United States Ban	skruptcy Court for the: EASTERN DISTRICT OF VIRGINIA	
Case number		Check if this is:
(If known)		☐ An amended filing
		☐ A supplement showing postpetition chapter 13 income as of the following date:
Official Fo	<u>rm 106l</u>	MM / DD/ YYYY
Schedule	I: Your Income	12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Describe Employment 1. Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. Employed Employed If you have more than one job, **Employment status** attach a separate page with ■ Not employed ■ Not employed information about additional employers. Occupation Longshoreman **Teacher** Include part-time, seasonal, or **Employer's name Chesapeake Public Schools Ceres Marine** self-employed work. **Employer's address** Occupation may include student 901 Port Center Pkwy 312 Cedar Road or homemaker, if it applies. Suite 10 Chesapeake, VA 23322 Portsmouth, VA 23704 How long employed there? 23 years 1 year

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 2 or

+\$

non-filing spouse

3,547.00

3,547.00

0.00

For Debtor 1

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

2. \$ 7,022.00

4. \$ 7,022.00

Official Form 106I Schedule I: Your Income page 1

Debt Debt		Justin Talbott Powell Sharon Snell Powell	_	Case r	number (<i>if known</i>)			
	0	or Perce Al brown		For	Debtor 1	For Debt	g spouse	
	Cop	y line 4 here	4.	ъ	7,022.00	\$	3,547.00	-
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	1,586.00	\$	748.00	_
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	220.00	-
	5d. 5e.	Required repayments of retirement fund loans Insurance	5d. 5e.	\$ \$	0.00	\$ \$	0.00	=
	5f.	Domestic support obligations	5f.	\$ -	0.00	\$	0.00	-
	5g.	Union dues	5g.	\$_	120.00	\$	0.00	-
	5h.	Other deductions. Specify: Cope	5h.⊣	- \$	4.00	+ \$	0.00	-
		ILA		\$	67.00	\$	0.00	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,777.00	\$	968.00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,245.00	\$	2,579.00	-
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		_	,			-
	٥L	monthly net income.	8a.	\$_	0.00	\$	0.00	-
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8b. 1t 8c.	\$ \$	0.00	\$ \$	0.00	-
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	-
	8e.	Social Security	8e.	\$	0.00	\$	0.00	-
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	ce 8f. 8g.	\$	0.00	\$ \$	0.00	-
	8h.	Other monthly income. Specify: Holiday pay (net)	8h.⊣	- \$	833.00		0.00	_
		Tionady pay (not)	_			· •	0.00	- ¬
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	833.00	\$	0.00	<u> </u>
10.	Cald	culate monthly income. Add line 7 + line 9.	10. \$	6	5,078.00 + \$	2,579.0	0 = \$	8,657.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.				·		·
11.	Inclu othe	e all other regular contributions to the expenses that you list in <i>Schedu</i> ade contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ur depei			sted in Sched	dule J. 1. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The re e that amount on the Summary of Schedules and Statistical Summary of Ceries						8,657.00
13.	Do y	you expect an increase or decrease within the year after you file this form	n?				Combir monthl	ned y income
		No. Yes. Explain: Debtor 1 will recieve a container royalter in Dec	ember	whic	h will prorate	monthly a	ıt annrovi	mately
	_	\$717 per month.	J D		prorate		app. 01	

Fill in this inform	ation to identify yo	our case:			1		
Debtor 1	Justin Talbo		1		Chec	k if this is:	
Debtor 2	Sharon Snel						wing postpetition chapter the following date:
(Spouse, if filing)						'	the following date.
United States Bank	ruptcy Court for the:	EASTE	RN DISTRICT OF VIRGIN	IIA		MM / DD / YYYY	
Case number (If known)							
Official Fo	orm 106J						
	J: Your I						12/1
information. If r		eded, atta	. If two married people a ach another sheet to this n.				
Part 1: Desc	ribe Your House	hold					
1. Is this a jo							
□ No. Go t			rete havrada 140				
_	es Debtor 2 live	ın a sepai	rate nousenoid?				
■ 1 □ `		st file Offic	ial Form 106J-2, <i>Expense</i>	s for Separate Hous	<i>ehold</i> of Deb	tor 2.	
2. Do you hav	ve dependents?	□ No					
Do not list I and Debtor		■ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
Do not state	e the						□ No
dependents	s names.			son		9	■ Yes
				daughter		13	□ No ■ Yes
							☐ No
							☐ Yes
							□ No
3. Do vour ex	penses include	_	Na				☐ Yes
expenses	of people other the dependent	han $_{\sqcap}$	No Yes				
Estimate your e		our bankr	uptcy filing date unless y				
applicable date		oankrupto	y is filed. If this is a sup	piementai S <i>cnedul</i> i	e J, cneck tr	ie box at the top o	of the form and fill in the
	ch assistance an		government assistance cluded it on <i>Schedule I:</i>			Your exp	enses
	or home owners		nses for your residence.	Include first mortgag	je 4. \$		1,782.00
If not inclu	ded in line 4:						
4a. Real	estate taxes				4a. \$		0.00
4b. Prop	erty, homeowner's				4b. \$		0.00
	e maintenance, re				4c. \$		200.00
	eowner's associat		dominium dues our residence, such as ho	ma aquitu laana	4d. \$ 5 \$		37.00

	tor 1 Justin Talbott Powell tor 2 Sharon Snell Powell	Case nun	nber	(if known)				
6. Utilities:								
٥.	6a. Electricity, heat, natural gas	6a.	. \$	238.00				
	6b. Water, sewer, garbage collection	6b.	. \$	120.00				
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	. \$	280.00				
	6d. Other. Specify: Bundle	6d.	. \$	199.00				
	netflix		\$	10.00				
	hulu	_	\$	10.00				
7.	Food and housekeeping supplies	7.	. \$	1,100.00				
8.	Childcare and children's education costs	8.	. \$	0.00				
9.	Clothing, laundry, and dry cleaning	9.	. \$	200.00				
10.	Personal care products and services	10.	. \$	100.00				
11.		11.	. \$	50.00				
12.	Transportation. Include gas, maintenance, bus or train fare.	10	Φ	720.00				
40	Do not include car payments.		. \$					
	Entertainment, clubs, recreation, newspapers, magazines, and books		. \$	95.00				
	Charitable contributions and religious donations	14.	. \$	0.00				
15.	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.							
	15a. Life insurance	15a.	. \$	0.00				
	15b. Health insurance	15b.		0.00				
	15c. Vehicle insurance	15c.		185.00				
	15d. Other insurance. Specify:	15d.		0.00				
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		. Ψ	0.00				
	Specify: pers prop tax and tags	16.	. \$	60.00				
17.	Installment or lease payments:	47-	Φ.	0.00				
	17a. Car payments for Vehicle 1	17a.		0.00				
	17b. Car payments for Vehicle 2	17b.		0.00				
	17c. Other. Specify:	17c.		0.00				
40	17d. Other. Specify:	17d.	. ф	0.00				
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.	. \$	0.00				
19.	Other payments you make to support others who do not live with you.		\$	0.00				
	Specify:	19.						
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schee			Income.				
	20a. Mortgages on other property	20a.		0.00				
	20b. Real estate taxes	20b.	. \$	0.00				
	20c. Property, homeowner's, or renter's insurance	20c.	. \$	0.00				
	20d. Maintenance, repair, and upkeep expenses	20d.	. \$	0.00				
	20e. Homeowner's association or condominium dues	20e.	. \$	0.00				
21.	Other: Specify: contingencies	21.	. +\$	420.00				
	Travel cheer		+\$	210.00				
	Misc Sports		+\$					
	Teacher supplies		+\$					
	Work Boots		+\$	50.00				
	School supplies		+\$					
00								
22.	Calculate your monthly expenses			© 404.00				
	22a. Add lines 4 through 21.			\$6,161.00				
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2			\$				
	22c. Add line 22a and 22b. The result is your monthly expenses.			\$6,161.00				
23.	Calculate your monthly net income.		_					
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	. \$	8,657.00				
	23b. Copy your monthly expenses from line 22c above.	23b.						
			Ė					
	23c. Subtract your monthly expenses from your monthly income.	00	•	2,496.00				
	The result is your monthly net income.	23c.	. [Φ	2,430.00				

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Debtor 1	Justin Talbott Powell	
Debtor 2	Sharon Snell Powell	Case number (if known)
For e	you expect an increase or decrease in your expenses withiexample, do you expect to finish paying for your car loan within the year offication to the terms of your mortgage?	in the year after you file this form? In the year after you file this form? In do you expect your mortgage payment to increase or decrease because of a
	No.	
□Y	Yes. Explain here:	

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Debtor 1 Justin Talbott Powell First Name Middle Name Last Name Middle Name Last Name Debtor 2 Sharon Snell Powell First Name Middle Name Last Name United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Case number (if thrown) Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Justin Talbott Powell Signature of Debtor 1 Data. Enhancer, 2, 2019. Data. Enhancer, 2, 2019. In the Sharon Snell Powell Signature of Debtor 2 Data. Enhancer, 2, 2019.	Fill in this info	mation to identify you				
Debtor 2 Sharon Snell Powell First Name						
Debtor 2 Sharon Snell Powell First Name Middle Name Last Name Case number Cit known	Debtor 1				-	
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Case number (If known) Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Justin Talbott Powell Justin Talbott Powell Signature of Debtor 1 Last Name Check if this is an amended filing 12/15	Dahtar 0			Last I	Name	
United States Bankruptcy Court for the: EASTERN DISTRICT OF VIRGINIA Case number (Ifknown) Check if this is an amended filing Check if this is an amended f				l ast l	Name	
Case number (if known) Check if this is an amended filling	, ,		made name			
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Justin Talbott Powell Justin Talbott Powell Signature of Debtor 1 X /s/ Sharon Snell Powell Signature of Debtor 2	United States Ba	ankruptcy Court for the:	EASTERN DISTRICT OF VIRGIN	NIA		
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Justin Talbott Powell Justin Talbott Powell Signature of Debtor 1 X /s/ Sharon Snell Powell Signature of Debtor 2	Case number					
Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X IsI Justin Talbott Powell Signature of Debtor 1 Signature of Debtor 2	_					☐ Check if this is an
Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Justin Talbott Powell Signature of Debtor 1 Signature of Debtor 2						amended filing
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Justin Talbott Powell Justin Talbott Powell Signature of Debtor 1 X /s/ Sharon Snell Powell Signature of Debtor 2	You must file thi	is form whenever you y or property by fraud	file bankruptcy schedules or amer in connection with a bankruptcy c	nde	d schedules. Making a false st	
No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Justin Talbott Powell Justin Talbott Powell Signature of Debtor 1 Signature of Debtor 2	Sig	n Below				
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Justin Talbott Powell Justin Talbott Powell Signature of Debtor 1 Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) X /s/ Sharon Snell Powell Signature of Debtor 2	Did you pa	ay or agree to pay som	eone who is NOT an attorney to he	elp y	ou fill out bankruptcy forms?	
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Justin Talbott Powell Justin Talbott Powell Signature of Debtor 1 Declaration, and Signature (Official Form 119) X /s/ Sharon Snell Powell Signature of Debtor 2	■ No					
that they are true and correct. X /s/ Justin Talbott Powell Justin Talbott Powell Signature of Debtor 1 X /s/ Sharon Snell Powell Sharon Snell Powell Signature of Debtor 2	☐ Yes.	Name of person				
Justin Talbott PowellSharon Snell PowellSignature of Debtor 1Signature of Debtor 2	•		e that I have read the summary and	d sc	hedules filed with this declara	ation and
Signature of Debtor 1 Signature of Debtor 2	X /s/ Jus	stin Talbott Powell		Х	s/ Sharon Snell Powell	
	Justin	Talbott Powell				
Data Fahruary 2 2019	Signatu	ire of Debtor 1		,	Signature of Debtor 2	
Pale Febluary 2, 2010 Pale Febluary 2, 2010	Date	February 2, 2018			Date February 2, 2018	

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311	l in this inform	nation to identify you	case.							
De	btor 1	Justin Talbott Po	Middle Name		Last Name					
De	btor 2	Sharon Snell Po	well							
(Sp	ouse if, filing)	First Name	Middle Name		Last Name					
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTR	RICT OF VIRO	SINIA					
	se number _ nown)						heck if this is an mended filing			
	fficial Fo		Affairs for In	dividual	ls Filing for B	ankruptcy	4/16			
info nur	ormation. If m	ore space is needed, n). Answer every ques	attach a separate s tion.	sheet to this f	form. On the top of an	e equally responsible for sup by additional pages, write you				
		etails About Your Ma		iere fou Live	ed Before					
1.	what is you	r current marital statu	5							
	■ Married □ Not mai	ried								
2.	During the la	uring the last 3 years, have you lived anywhere other than where you live now?								
	■ No □ Yes. Lis	 ■ No □ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. 								
	Debtor 1 Pr	ior Address:	Dates D lived the		Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there			
3. stat						nity property state or territor tico, Texas, Washington and V				
	■ No □ Yes. Ma	ike sure you fill out <i>Sch</i>	nedule H: Your Code	btors (Official	Form 106H).					
Pa	rt 2 Explai	n the Sources of You	r Income							
4.	Fill in the tota	al amount of income yo	u received from all jo	bs and all bu	ousiness during this y sinesses, including par ether, list it only once u		ndar years?			
	□ No ■ Yes. Fil	in the details.								
			Debtor 1			Debtor 2				
			Sources of income Check all that apply	v. (be	ross income efore deductions and clusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year until d for bankruptcy:	■ Wages, commis bonuses, tips	sions,	\$9,000.00	■ Wages, commissions, bonuses, tips	\$3,659.79			
			☐ Operating a bus	iness		☐ Operating a business				

Official Form 107

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	otor 1 otor 2	-	stin Talbo aron Snel			Cas	se number (if known)		
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
			■ Wages, commissions, bonuses, tips	\$100,251.00	■ Wages, combonuses, tips	nmissions,	s, \$36,849.00		
					☐ Operating a business		☐ Operating a	business	
			dar year be December		■ Wages, commissions, bonuses, tips	\$96,561.00	■ Wages, combonuses, tips	nmissions,	\$28,490.00
					☐ Operating a business		☐ Operating a	business	
	List €	No	source and t	J	ome from each source separ Debtor 1	ately. Do not include income	that you listed in li	ne 4.	
	.	No		J	ome from each source separ	ately. Do not include income	that you listed in II	ne 4.	
					Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of inc	ome	Gross income
					Describe below.	each source (before deductions and exclusions)	Describe below		(before deductions and exclusions)
Par	t 3:	List	Certain Pa	yments You	Made Before You Filed for	· Bankruptcy			
.	_	No.	Neither Do individual puring the No. Yes	90 days before Go to line 7 List below e paid that crunot include to adjustmen 90 days before 2 or 90 days before Go to line 7	personal, family, or househouse you filed for bankruptcy, or each creditor to whom you payeditor. Do not include payments to an attorney for ton 4/01/19 and every 3 year both have primarily consider you filed for bankruptcy, or	sumer debts. Consumer debtold purpose." did you pay any creditor a tot aid a total of \$6,425* or more ents for domestic support oblithis bankruptcy case. urs after that for cases filed o	al of \$6,425* or more paigations, such as control or after the date of \$600 or more.	ore? yments and hild support of adjustmer?	the total amount you and alimony. Also, do nt.
			— 163	include pay		obligations, such as child su			
	Cre	ditor'	s Name and	d Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this	payment for

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Del	otor 2	Sharon Snell Powell		Cas	e number (if knowr)	
7.	Inside corpo includ	in 1 year before you filed for bankruptoers include your relatives; any general paterations of which you are an officer, directing one for a business you operate as a port and alimony.	artners; relatives of any gentor, person in control, or ow	eral partners; partners of 20% or more	erships of which ye of their voting se	ou are a genera curities; and an	al partner; y managing agent,
		No					
		Yes. List all payments to an insider.					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	insid	in 1 year before you filed for bankruptoer? de payments on debts guaranteed or cos		nents or transfer a	any property on	account of a de	ebt that benefited an
		No					
		Yes. List all payments to an insider					
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment
				paid	Still OWE	iliciade crea	itoi s riame
Pai	rt 4:	Identify Legal Actions, Repossession	ns, and Foreclosures				
9.	List a	in 1 year before you filed for bankrupto Il such matters, including personal injury ications, and contract disputes.					
		No					
		Yes. Fill in the details.					
		e title e number	Nature of the case	Court or agency		Status of th	e case
10.		in 1 year before you filed for bankrupt k all that apply and fill in the details belov		rty repossessed, f	oreclosed, garn	ished, attached	d, seized, or levied?
		No. Go to line 11. Yes. Fill in the information below.					
	Cred	ditor Name and Address	Describe the Property		Date	•	Value of the
			Explain what happened				property
11.	acco	in 90 days before you filed for bankrup unts or refuse to make a payment bec No Yes. Fill in the details.		uding a bank or fi	nancial institutio	on, set off any a	amounts from your
	Cred	ditor Name and Address	Describe the action the	creditor took	Date	action was	Amount
					take	n	
12.		in 1 year before you filed for bankrupt -appointed receiver, a custodian, or a		rty in the possess	ion of an assign	ee for the bene	efit of creditors, a
	_	No					
	ш '	Yes .					
Pai	rt 5:	List Certain Gifts and Contributions					
13.	_	i <mark>n 2 years before you filed for bankrup</mark> No	etcy, did you give any gifts	s with a total value	of more than \$6	600 per person	?
		Yes. Fill in the details for each gift.					
		s with a total value of more than \$600 person	Describe the gifts		Date the	es you gave gifts	Value
		son to Whom You Gave the Gift and ress:					

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Debtor 1 Justin Talbott Powell

Del	otor 2 Sharon Snell Powell		Case numb	er (if known)	
14.		kruptcy,	did you give any gifts or contributions with a t	otal value of more than	\$600 to any charity?
	No				
	Yes. Fill in the details for each gift o	r contribu	tion.		
	Gifts or contributions to charities that more than \$600 Charity's Name		Describe what you contributed	Dates you contributed	Value
	Address (Number, Street, City, State and ZIP Co	ode)			
Pai	t 6: List Certain Losses				
15.	Within 1 year before you filed for bank disaster, or gambling?	ruptcy or	since you filed for bankruptcy, did you lose a	nything because of the	ft, fire, other
	□ No				
	Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred		be any insurance coverage for the loss	Date of your	Value of property lost
	now the loss occurred		e the amount that insurance has paid. List	loss	1031
		Proper	g insurance claims on line 33 of Schedule A/B:		
	fender bender	insur	ance company paid body shop directly	6/2017	\$0.00
		\$2000			
	consulted about seeking bankruptcy of Include any attorneys, bankruptcy petition No Yes. Fill in the details. Person Who Was Paid		rs, or credit counseling agencies for services requ Description and value of any property	iired in your bankruptcy. Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if No	t You	transferred	or transfer was made	payment
	credit counseling		certificate	1/28/18	\$10.00
	Harbour Law, P.L.C. 500 E. Main Street Suite 1230 Norfolk, VA 23510		\$310 filing fee, \$200 attorney fee	2/2/2018	\$510.00
17.		reditors o	id you or anyone else acting on your behalf pa or to make payments to your creditors? ted on line 16.	ny or transfer any prope	erty to anyone who
	Person Who Was Paid		Description and value of any property	Date payment	Amount of
	Address		transferred	or transfer was made	payment

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Debtor 1 **Justin Talbott Powell**Debtor 2 **Sharon Snell Powell**

Case number (if known)

18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers mainclude gifts and transfers that you have alread No Yes. Fill in the details.	usiness or financial affa ade as security (such as	airs? the granting of a s				
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr		payme	be any property or ents received or debts n exchange	Date transfer made	was
19.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro No Yes. Fill in the details.		y property to a s	elf-settle	d trust or similar device	of which you a	ire a
	Name of trust	Description and v	alue of the prop	erty trans	ferred	Date Transfermade	r was
Pa r 20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, chouses, pension funds, cooperatives, associated.	y, were any financial ac or other financial accou	counts or instru	ments he	ld in your name, or for y	•	•
	Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of accour instrument	nt or	Date account was closed, sold, moved, or transferred	Last ba before closi tra	
21.	Do you now have, or did you have within 1 years, or other valuables? No Yes. Fill in the details.	year before you filed for	r bankruptcy, any	∕ safe deβ	oosit box or other depos	sitory for securi	ities,
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe 1	the contents	Do you stil have it?	II
22.	Have you stored property in a storage unit of	or place other than your	home within 1 y	ear befor	e you filed for bankrup	cy?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe (the contents	Do you stil have it?	I
Par	t 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that so for someone. No Yes. Fill in the details.	meone else owns? Incl	ude any property	you borr	owed from, are storing	for, or hold in t	rust
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S		Describe 1	the property	,	Value
	t 10: Give Details About Environmental Info						
⊢or	the purpose of Part 10, the following definiti	ons appiy:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or

Debtor 1 **Justin Talbott Powell**Debtor 2 **Sharon Snell Powell**

Case number (if known)

	regulations controlling the cleanup of the	ese s	ubstances, wastes, or material.		_	
	Site means any location, facility, or propeto own, operate, or utilize it, including di	spos	al sites.			
	Hazardous material means anything an e hazardous material, pollutant, contamina			s wa	ste, hazardous substance, toxic	substance,
Rep	port all notices, releases, and proceedings	that	you know about, regardless of wher	n the	ey occurred.	
24.	Has any governmental unit notified you t	hat y	ou may be liable or potentially liable	une	der or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code	e)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit	of ar	ny release of hazardous material?			
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code	e)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or a	admir	nistrative proceeding under any envi	iron	mental law? Include settlements	and orders.
	■ No □ Yes. Fill in the details.					
	Case Title		Court or agency	Nat	ture of the case	Status of the
	Case Number		Name Address (Number, Street, City, State and ZIP Code)			case
Pai	rt 11: Give Details About Your Business	or Co	onnections to Any Business			
27.	Within 4 years before you filed for bankro	uptcy	, did you own a business or have ar	ıy of	f the following connections to an	y business?
	☐ A sole proprietor or self-employe	ed in a	a trade, profession, or other activity,	eith	ner full-time or part-time	
	☐ A member of a limited liability co	mpar	ny (LLC) or limited liability partnersh	ip (I	LLP)	
	☐ A partner in a partnership					
	☐ An officer, director, or managing	exec	utive of a corporation			
	☐ An owner of at least 5% of the vo	ting o	or equity securities of a corporation			
	No. None of the above applies. Go	_				
	Yes. Check all that apply above and					
	Business Name		Describe the nature of the business	•	Employer Identification numbe	r
	Address (Number, Street, City, State and ZIP Code)	N	lame of accountant or bookkeeper		Do not include Social Security Dates business existed	
28.	Within 2 years before you filed for bankre institutions, creditors, or other parties.	uptcy	, did you give a financial statement	to a		ude all financial
	■ No □ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	D	Pate Issued			

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers

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Deptor 1	Justin Taibott Powell	
Debtor 2	Sharon Snell Powell	Case number (if known)
with a bar	•	a false statement, concealing property, or obtaining money or property by fraud in connection \$250,000, or imprisonment for up to 20 years, or both.
/s/ Justi	in Talbott Powell	/s/ Sharon Snell Powell
Justin T	Talbott Powell	Sharon Snell Powell
Signatur	e of Debtor 1	Signature of Debtor 2
Date F	ebruary 2, 2018	Date February 2, 2018
Did you a	ttach additional pages to Your Stater	nent of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No		
☐ Yes		
_ ′ '	oay or agree to pay someone who is n	ot an attorney to help you fill out bankruptcy forms?
■ No		
☐ Yes. Na	ame of Person Attach the Bank	ruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 18-70324-FJS Doc 1 Filed 02/02/18 Entered 02/02/18 17:09:05 Desc Main Document Page 42 of 59
United States Bankruptcy Court
Eastern District of Virginia

	Justin Talbott Powell			
In re	Sharon Snell Powell		Case No.	
		Debtor(s)	Chapter	13

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 5,151.00
	Prior to the filing of this statement I have received \$ 200.00
	Balance Due \$ 4,951.00
2.	The source of the compensation paid to me was:
	■ Debtor □ Other (specify)
3.	The source of compensation to be paid to me is:
	■ Debtor □ Other (specify)
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Other provisions as needed: ATTORNEY FEE INCLUDES: Exemption planning; preparation and filing of reaffirmation agreements and applications as needed; representation of the debtors in any relief from stay actions.
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following services: ATTORNEY FEE EXCLUDES: Representation of Debtor(s) in obtaining remedies or enforcement of rights based upon non-bankruptcy law; or representation in any forum outside of the U.S. Bankruptcy Court are specifically excluded as are adversary proceedings, appeals and objections to discharge.
	Any funds paid by the Debtor(s) to Harbour Law PLC prior to the case filing are disclosed at paragraph 16 of the Statement of Financial Affairs and applied, if applicable, first to payment of Bankruptcy Court filing fee, then to the Circuit Court homestead deed filing fee, and finally to fees.

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CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

February 2, 2018	/s/ Dana S. Power	
Date	Dana S. Power 33101	
	Signature of Attorney	
	Harbour Law, P.L.C	
	Name of Law Firm	
	500 E. Main St.	
	Suite 1230	
	Norfolk, VA 23510	

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,100 (For all Cases Filed on or after 01/01/2016)

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

The undersigned hereby certifies that on this date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trustee, and U. S. trustee pursuant to Local Bankruptcy Rule 2016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class mail).

February 2, 2018	/s/ Dana S. Power
Date	Dana S. Power 33101
	Signature of Attorney

Fill in this inforr	nation to identify your case:
Debtor 1	Justin Talbott Powell
Debtor 2 (Spouse, if filing)	Sharon Snell Powell
United States E	Bankruptcy Court for the: Eastern District of Virginia
Case number (if known)	

Check	as directed in lines 17 and 21:
	cording to the calculations required by this tement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
•	Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income 1. What is your marital and filing status? Check one only.

□ Not married. Fill out Column A, lines 2-11.

■ Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income variety for the first space of the

		-	Column A Debtor 1	Debt	mn B or 2 or filing spouse
Your gross wages, salary, tips, bonuses, overtim all payroll deductions).	e, and commissio	ns (before \$	9,248.00	\$	3,547.00
 Alimony and maintenance payments. Do not included Column B is filled in. 	de payments from a	a spouse if \$	0.00	\$	0.00
 All amounts from any source which are regularly of you or your dependents, including child support from an unmarried partner, members of your househ and roommates. Do not include payments from a spoyou listed on line 3. Net income from operating a business, 	ort. Include regular old, your dependen	contributions nts, parents,	0.00	\$	0.00
profession, or farm	Debtor 1				
Gross receipts (before all deductions)	\$ 0.00				
Ordinary and necessary operating expenses	-\$ 0.00				
Net monthly income from a business, profession, or	farm \$ 0.00	Copy here -> \$	0.00	\$	0.00
6. Net income from rental and other real property	Debtor 1				
Gross receipts (before all deductions)	\$ 0.00				
Ordinary and necessary operating expenses	-\$ 0.00				
Net monthly income from rental or other real property	, _{\$} 0.00 (Copy here -> \$	0.00	\$	0.00

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period Case 18-70324-FJS Doc 1 Filed 02/02/18 Entered 02/02/18 17:09:05 Desc Main Document Page 45 of 59

Debtor 1 Debtor 2	Sharon Snell Powell			Case numb	oer (<i>if known</i>)		
				Column A Debtor 1	4	Column E Debtor 2 non-filing	or
7. Inte	erest, dividends, and royalties			\$	0.00	\$	0.00
	employment compensation			\$	0.00	\$	0.00
Do	not enter the amount if you conto der the Social Security Act. Instea		as a benefit	·			
F	or you	\$	0.00				
F	or your spouse	\$	0.00				
9. Per	nsion or retirement income. Do nefit under the Social Security Ac	not include any amount receive	ed that was a	\$	0.00	\$	0.00
Do rece don	ome from all other sources no not include any benefits received eived as a victim of a war crime, nestic terrorism. If necessary, lis al below.	d under the Social Security Act of a crime against humanity, or int	or payments ernational or				
				\$	0.00	\$	0.00
				\$	0.00	\$	0.00
	Total amounts from separa	te pages, if any.	+	. \$	0.00	\$	0.00
	culate your total average monthsh column. Then add the total for			9,248.00	+ \$	3,547.00	= \$ 12,795.00
Part 2:	Determine How to Measure	Your Deductions from Incom	е				monthly income \$ 12,795.00
13. Cal	culate the marital adjustment.						
	You are not married. Fill in 0 be	elow.					
	You are married and your spou	ise is filing with you. Fill in 0 belo	ow.				
	You are married and your spou	ise is not filing with you.					
	dependents, such as payment	e listed in line 11, Column B, that of the spouse's tax liability or the	e spouse's supp	ort of some	one other t	nan you or y	our dependents.
	adjustments on a separate page		ount of income d	evoted to ea	ich purpos	e. If necessa	ıry, list additional
	If this adjustment does not app	ly, effici o below.	\$				
			+\$				
	Total			0.	00 Co	py here=>	_ 0.00
14. Y o	our current monthly income. S	Subtract line 13 from line 12.					\$12,795.00
15. C a	alculate your current monthly i	ncome for the year. Follow the	ese steps:				
			·				_{\$} 12,795.00
.0	Multiply line 15a by 12 (the r						x 12
15	b. The result is your current mo	onthly income for the year for thi	s part of the form	n			\$ 153,540.00

Justin Talbott Powell

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To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a.	Debtor 1 Debtor 2		on Snell Powell	Case number (if known)	Case number (if known)				
16b. Fill in the number of people in your household. 16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined in U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form 12C-2b. On line 39 of that for 20c your current monthly income from line 11. 18 Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 19b. Subtract line 19a from line 18. 20c. Calculate your current monthly income for the year. Follow these steps: 21c. Poly line 19b Multiply by 12 (the number of months in a year). 22c. Copy line 19b Subtract line 19a from line 19c. Line 20c. U	16. Ca	alculate th	ne median family income that applies to yo	u. Follow these steps	:				
16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determine in U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C.§ (b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that for copy your current monthly income from line 14 above. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. S 12,7 19. Deduct the marktal adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouses income, copy the amount from line 13. 19a. If the marital adjustment does not apply, fill in 0 on line 19a. \$ 12,795 Multiply by 12 (the number of months in a year). \$ 12,795 A 12 20b. The result is your current monthly income for the year. Follow these steps: 20c. Copy the median family income for your state and size of household from line 16c \$ 101,389 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box commitment period is 5 years. Go to Part 4.	16	a. Fill in th	he state in which you live.	VA					
16c. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determine in 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that for copy your current monthly income from line 14 above. Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. S 12,7 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouses in come, copy the amount from line 13. 19a. If the marital adjustment does not apply, fill in 0 on line 19a. \$ 12,795 Multiply by 12 (the number of months in a year). \$ 12,795 A 12 20b. The result is your current monthly income for the year. Follow these steps: 20c. Copy the median family income for your state and size of household from line 16c \$ 101,389 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box commitment period is 5 years. Go to Part 4.	161	b. Fill in th	he number of people in your household.	4					
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contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 19a. If the marital adjustment does not apply, fill in 0 on line 19a. -\$ 19b. Subtract line 19a from line 18. \$ 12,795 20. Calculate your current monthly income for the year. Follow these steps: 20a. Copy line 19b Multiply by 12 (the number of months in a year). 20b. The result is your current monthly income for the year for this part of the form \$ 153,540 20c. Copy the median family income for your state and size of household from line 16c \$ 101,389 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The comperiod is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box commitment period is 5 years. Go to Part 4.	18. Co	py your t	total average monthly income from line 11	-		\$ 12,795.00			
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20. Calculate your current monthly income for the year. Follow these steps: 20a. Copy line 19b				ne 19a.		-\$0.00			
20a. Copy line 19b Multiply by 12 (the number of months in a year). x 12 20b. The result is your current monthly income for the year for this part of the form 20c. Copy the median family income for your state and size of household from line 16c \$ 101,389 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The compariod is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box commitment period is 5 years. Go to Part 4.						\$12,795.00			
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 period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box commitment period is 5 years. Go to Part 4. 	21.	. How de	o the lines compare?						
commitment period is 5 years. Go to Part 4.				e ordered by the court	, on the top of page 1 of this form, o	check box 3, The commitmen			
Circ Polou				ess otherwise ordered	by the court, on the top of page 1 c	of this form, check box 4, The			
Part 4: Sign Below	Part 4:	Sign	Below						
By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.	Ву	signing h	nere, under penalty of perjury I declare that the	e information on this s	tatement and in any attachments is	s true and correct.			
X /s/ Justin Talbott Powell X /s/ Sharon Snell Powell									
Justin Talbott Powell Signature of Debtor 1 Signature of Debtor 2	_								
Date February 2, 2018 Date February 2, 2018		ate Febr i	uary 2, 2018	`					
MM / DD / YYYY		MM /	DD / YYYY			_			
If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 is	_			. ,					

Justin Talbott Powell

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					1			
Fill in	this information to	identify your cas	e:					
Debtor	Justin Ta	lbott Powell						
Debtor (Spous	Sharon See, if filing)	nell Powell						
United	States Bankruptcy C	ourt for the: Eas	tern District of Virgini	ia				
Case r	number wn)					Check if this	is an amende	ed filing
Official	Form 122C-2							
Cha	pter 13 Cal	culation of	f Your Disp	osable Ir	ncome			04/16
	out this form, you w itment Period (Offic		pleted copy of <i>Cha</i> j	pter 13 Stateme	ent of Your Current M	onthly Incom	ne and Calcula	tion of
space i		separate sheet to	this form, Include t	the line number	ether, both are equall to which additional			
Part 1	Calculate You	Deductions from	Your Income					
the	Internal Revenue S questions in lines 6 rmation may also b	-15. To find the IF	S standards, go on	nline using the	or certain expense an link specified in the s	nounts. Use the separate instr	hese amounts ructions for thi	to answer the is form. This
expe	enses if they are high	er than the standa	rds. Do not include a	ny operating exp	ense. In later parts of to benses that you subtra s income in line 13 of F	acted from inco	ome in lines 5 a	
If yo	our expenses differ fro	om month to month	, enter the average e	expense.				
Note	e: Line numbers 1-4 a	are not used in this	form. These number	rs apply to inforr	nation required by a si	milar form use	ed in chapter 7	cases.
5.	The number of peo	ple used in deter	mining your deduct	tions from inco	me			
		any additional depe	endents whom you su		ederal income tax retu nber may be different f		4	
Nati	ional Standards	You must us	e the IRS National St	tandards to ansv	ver the questions in lin	es 6-7.		
6.			ng the number of per food, clothing, and of		d in line 5 and the IRS	National	\$	1,650.00
7.	the dollar amount for people who are 65 c	r out-of-pocket hea or olderbecause o	alth care. The numbe	er of people is sp nigher IRS allowa	ntered in line 5 and the dit into two categories- ance for health car cos 22.	-people who a	re under 65 an	d

Official Form 22C-2

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Justin Talbott Powell Debtor 1 **Sharon Snell Powell** Debtor 2 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 4 7b. Number of people who are under 65 7c. Subtotal. Multiply line 7a by line 7b. 196.00 Copy here=> \$ 196.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 0.00 7g. Total. Add line 7c and line 7f 196.00 Copy total here=> 196.00 Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, 662.00 fill in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 1,717.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment Seterus, Inc. 1,782.00 Copy Repeat this amount 1.782.00 1,782.00 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Сору 0.00 0.00 here=> or rent expense). If this number is less than \$0, enter \$0. 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

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Debtor 1 Debtor 2		n Snell Powell		Case number (if kno	own)		
11.	Local tra	nsportation expenses: Check the number of vehic	cles for which you clain	n an ownership c	or operating	g expense.	
	□ 0. Go	to line 14.					
	□ 1. Go	to line 12.					
	■ 2 or m	ore. Go to line 12.					
12.		pperation expense: Using the IRS Local Standards expenses, fill in the <i>Operating Costs</i> that apply for					430.00
13.	Vehicle of You may	ownership or lease expense: Using the IRS Local not claim the expense if you do not make any loan two vehicles.	Standards, calculate t	he net ownership	or lease e	expense for each	
Ve	hicle 1	Describe Vehicle 1:					
13a	. Ownersh	p or leasing costs using IRS Local Standard		\$	0.00		
13b	. Average	monthly payment for all debts secured by Vehicle 1.					
	Do not in	clude costs for leased vehicles.					
	are contra	ate the average monthly payment here and on line actually due to each secured creditor in the 60 montry. Then divide by 60.		nat			
	Nan	ne of each creditor for Vehicle 1	Average monthly payment				
	-NC	NE-	\$				
						Repeat this	
		Total Average Monthly Payment	\$0.00	Copy here => -\$	0	amount on line 33b.	
13c.	. Net Vehic	cle 1 ownership or lease expense				Copy net	
	Subtract	line 13b from line 13a. if this number is less than \$0	, enter \$0		0.00	Vehicle 1 expense here => \$ _	0.00
	hicle 2	Describe Vehicle 2:					
		p or leasing costs using IRS Local Standard			0.00		
13e	. Average leased ve	monthly payment for all debts secured by Vehicle 2. chicles.	Do not include costs t	for			
	Nan	ne of each creditor for Vehicle 2	Average monthly payment				
	-NC	NE-	\$				
				Сору		Deposit this	
		Total average monthly payment	\$	here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehic	cle 2 ownership or lease expense				Copy net	
		line 13e from line 13d. if this number is less than \$0	, enter \$0		0.00	Vehicle 2 expense here => \$ _	0.00
14.		ansportation expense: If you claimed 0 vehicles ransportation expense allowance regardless of v				n the	0.00
15.	Addition also dedu	al public transportation expense: If you claimed a public transportation expense, you may fill in w	or more vehicles in line hat you believe is the	ne 11 and if you	claim that	ou may	0.00
	not claim	more than the IRS Local Standard for Public Trans	portation.			*	0.00

Justin Talbott Powell

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Debtor 1 Debtor 2 Sharon Snell Powell Case number (if known)

	er Necessary Expenses	the following IRS categories		listed above	e, you are allowed your monthly expenses	s tor				
16.	self-employment taxes, soo from your pay for these tax	cial security taxes, and Medic tes. However, if you expect to er from the total monthly amo	are taxes receive a	s. You may in a tax refund, y	nd local taxes, such as income taxes, clude the monthly amount withheld you must divide the expected refund by pay for taxes.	\$	0.00			
17.	Involuntary deductions: contributions, union dues,	The total monthly payroll deduand uniform costs.	ıctions th	at your job re	equires, such as retirement					
	Do not include amounts that	at are not required by your job	, such as	s voluntary 40	01(k) contributions or payroll savings.	\$	0.00			
18.	filing together, include pays	ments that you make for your or life insurance on your depe	spouse's	term life insu	fe insurance. If two married people are urance. g spouse's life insurance, or for any form	\$	0.00			
19.	administrative agency, suc	The total monthly amount the h as spousal or child support n past due obligations for spo	payment	s.	by the order of a court or You will list these obligations in line 35.	\$	0.00			
20.	Education: The total mont	thly amount that you pay for e	ducation	that is either	required:					
	as a condition for your job, or									
	for your physically or me	\$	0.00							
21.	Childcare: The total month preschool.		0.00							
	Do not include payments for	or any elementary or seconda	ry school	education.		\$	0.00			
22.	22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7.									
	Payments for health insura	ly in line 25.	\$	0.00						
	business cell phone service production of income, if it is Do not include payments for	ntification, special long distance, or re or that of your dependents or for the ervice. Do not include self-employment nount you previously deducted.	+\$	0.00						
24.		allowed under the IRS exper	ise allow	ances.		\$	2,938.00			
Add			Add lines 6 through 23. Additional Expense Deductions These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.							
		rioto. Bo not molado di	y expens							
25.		ity insurance, and health sa	vings ac	se allowances		or				
25.	insurance, disability insura	ity insurance, and health sa	vings ac	se allowances	s listed in lines 6-24. nses. The monthly expenses for health	or				
25.	insurance, disability insura your dependents.	ity insurance, and health sa	vings acunts that	se allowances count exper are reasonab	s listed in lines 6-24. nses. The monthly expenses for health	or				
25.	insurance, disability insura your dependents. Health insurance	ity insurance, and health sa	vings acunts that	se allowances count exper are reasonab 0.00	s listed in lines 6-24. nses. The monthly expenses for health	or				
25.	insurance, disability insura your dependents. Health insurance Disability insurance	ity insurance, and health sa nce, and health savings accor	vings acunts that	ccount experare reasonab	s listed in lines 6-24. nses. The monthly expenses for health	or \$	0.00			
25.	insurance, disability insural your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	ity insurance, and health sance, and health sance, and health savings accord	vings acunts that \$\$	count experare reasonab	s listed in lines 6-24. nses. The monthly expenses for health oly necessary for yourself, your spouse, o		0.00			
25.	insurance, disability insural your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this	ity insurance, and health sance, and health sance, and health savings accorded to the savings accorded	vings acunts that \$\$	count experare reasonab	s listed in lines 6-24. nses. The monthly expenses for health oly necessary for yourself, your spouse, o		0.00			
25.	insurance, disability insural your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do your actually spend this yes Continued contributions continue to pay for the reasof your household or members.	to the care of household or sonable and necessary care a	\$s family n and support of the control of the	ecount experare reasonable 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	copy total here=> e actual monthly expenses that you will rly, chronically ill, or disabled member or such expenses. These expenses		0.00			
26.	insurance, disability insura your dependents. Health insurance Disability insurance Health savings account Total Do you actually spend this No. How much do your service of your household or meming may include contributions to protection against family	to the care of household or sonable and necessary care a per of your immediate family wo an account of a qualified AE violence. The reasonably necessary care and the care of your immediate family wo an account of a qualified AE violence. The reasonably necessary care	\$ \$ \$ \$ family n and suppo	ecount experare reasonable 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.	copy total here=> e actual monthly expenses that you will rly, chronically ill, or disabled member or such expenses. These expenses	\$				

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Debtor 1 Debtor 2	Justin Talbott Powell Sharon Snell Powell	Cas	se number (<i>if known</i>)					
	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	e and operating expenses or	1				
	If you believe that you have home energy cline 8, then fill in the excess amount of hom	osts that are more than the home energy coste energy costs	sts included in expenses on					
	You must give your case trustee document amount claimed is reasonable and necessary	ation of your actual expenses, and you must ary.	show that the additional	\$	0.00			
	Education expenses for dependent child \$160.42* per child) that you pay for your depublic elementary or secondary school.	Iren who are younger than 18. The monthly pendent children who are younger than 18 ye	expenses (not more than ears old to attend a private o	r				
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must not already accounted for in lines 6-23.	explain why the amount					
	* Subject to adjustment on 4/01/19, and even	\$	0.00					
		he monthly amount by which your actual food allowances in the IRS National Standards. T s in the IRS National Standards.						
		ional allowance, go online using the link spec so be available at the bankruptcy clerk's office						
	You must show that the additional amount	\$	0.00					
	Continuing charitable contributions. The instruments to a religious or charitable organization.	al						
	Do not include any amount more than 15%	of your gross monthly income.		\$	0.00			
	32. Add all of the additional expense deductions. Add lines 25 through 31.							
	uctions for Debt Payment							
lo T	pans, and other secured debt, fill in lines	ent, add all amounts that are contractually du						
	Mortgages on your home				erage monthly ment			
33a.	Copy line 9b here		=>	\$	1,782.00			
	Loans on your first two vehicles							
33b.	Copy line 13b here		=>	\$_	0.00			
33c.				\$	0.00			
33d.	List other secured debts:							
	e of each creditor for other secured debt	Identify property that secures the debt	Does payment include taxes or insurance?					
			□ No					
	-NONE-		☐ Yes	\$				
				_				
			☐ Yes	æ				
				\$_				
			□ No					
			☐ Yes +	\$_				
			Cop	, [
33e	Total average monthly payment. Add lines	33a through 33d	e 1 782 00 tota		1,782.00			

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btor 1 btor 2		in Talbott Powell ron Snell Powell			Ca	se nı	umber (<i>if known</i>)				
			ne 33 secured by your prin			e,					
	No.	Go to line 35.		•	•						
		State any amount that you listed in line 33, to keep p	ou must pay to a creditor, in a cossession of your property (in the information below.								
Name	of the	creditor	Identify property that secu	res the d	ebt	To	tal cure amount		Month		
Sete	erus, I	nc.	516 Archer Place Ch 23322 Chesapeake Zillow value provide	City Co			14,000.00	÷ 60 :	= \$	233.33	3
	,	-	Zillow value provide	<u>u</u>	\$			÷ 60 :			_
					\$; <u> </u>		÷ 60 :	= +\$		_
					Total	\$	233.33	to	opy otal ere=> \$	233	3.33
			such as a priority tax, child date of your bankruptcy ca								
	No.	Go to line 36.									
	Yes.		all of these priority claims. Duch as those you listed in line		clude current or						
		Total amount of all past	-due priority claims			\$	1,552.00	<u> </u>	60 \$	25	5.87
36. P r	ojecte	d monthly Chapter 13 pla	an payment			\$		_			
Of the To	fice of e Exectifind a li	the United States Courts (utive Office for United Stat st of district multipliers that inc	s stated on the list issued by for districts in Alabama and I es Trustees (for all other distludes your district, go online using st may also be available at the ba	North Ca tricts).	rolina) or by	X .		7 -			
Av	erage	monthly administrative exp	pense				\$		y total => \$ _		
		of the deductions for de es 33e through 36.	bt payment.						\$_	2,041.2	:0
Total	Deduc	tions from Income									
38. Ac	d all c	of the allowed deductions	S.								
		ne 24, All of the expenses e allowances	allowed under IRS	\$_	2,938.0	0					
C	Copy lin		expense deductions	\$	0.0	0_					
			s for debt payment	+\$	2,041.2	0	٦				
Т	otal de	eductions		\$	4,979.2	0	Copy total here=	>	\$	4,979).20

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ebtor 1 ebtor 2	Justin Talbott Powell Sharon Snell Powell				. Ca	Case number (if known)					
art 2:	Dete	rmine You	r Disposable Income Under 11 U.	S.C. § 13	25(I	o)(2)					
			ent monthly income from line 14 Current Monthly Income and Calcu			,	d.		\$		12,795.00
chi disa rec nec	40. Fill in any reasonably necessary income you receive for support children. The monthly average of any child support payments, foster disability payments for a dependent child, reported in Part I of Form received in accordance with applicable nonbankruptcy law to the extensessary to be expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all and the contraction of the contraction of the contraction.					care payments, or 22C-1, that you nt reasonably		\$0	.00		
em in 1	ployer v I1 U.S.C	vithheld fro C. § 541(b)((7) plus all required repayments of k § 362(b)(19).	ed retiren	nent	plans, as specifie	ed	\$0	.00		
42. Tot	al of al	deduction	ns allowed under 11 U.S.C. § 707(b)(2)(A).	Cop	y line 38 here:	=>	\$ 4,979	.20		
exp the	enses a ir exper	and you ha ses. You n	al circumstances. If special circum ve no reasonable alternative, descrinust give your case trustee a detailed ocumentation for the expenses.	be the sp	ecia	al circumstances a	ınd				
Descri	be the	special cir	cumstances			Amount of exp	en	se			
						\$					
						\$					
-						\$					
				Total	\$_	0.00	- 1	Copy here=> \$		0.00	
44. To t	tal adju	stments. A	Add lines 40 through 43.			=>	\$_	4,979.20	Co _l	py re=> - \$	4,979.20
45. Ca l			thly disposable income under § 13	325(b)(2)	. Su	btract line 44 from	ı lin	e 39.		\$	7,815.80
hav tim you	ange in ve chang e your o	income oged or are vase will be our petition	r expenses. If the income in Form virtually certain to change after the copen, fill in the information below. I, check 122C-1 in the first column, on when the increase occurred, and	date you f For exam enter line	filed ple, 2 in	your bankruptcy pif the wages repo the second colum	rtec nn,	tion and during the d increased after			
Form	l	-ine	Reason for change			Date of change	е	Increase or decrease?	A	mount of cha	nge
☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220 ☐ 1220	D-2 _ D-1 D-2 _ D-1							☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease ☐ Increase ☐ Decrease ☐ Decrease	\$		
1220	C-1							☐ Increase☐ Decrease	\$		

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Debtor 1 Debtor 2	Justin Talbott Powell Sharon Snell Powell		Case number (if known)	
Part 4:	Sign Below			
			n on this statement and in any attachments is true a	and correct.
X.	/s/ Justin Talbott Powell	X	/s/ Sharon Snell Powell	
	Justin Talbott Powell Signature of Debtor 1		Sharon Snell Powell Signature of Debtor 2	
	February 2, 2018 MM / DD / YYYY	Date	February 2, 2018 MM / DD / YYYY	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. BWW Law Group, LLC 8100 Three Chopt Rd Ste 240 Richmond, VA 23229

Capital One Bankruptcy Claims Servicer P.O. Box 30253 Salt Lake City, UT 84130-0253

Dillards Amex PO Box 71118 Charlotte, NC 28272

Internal Revenue Service Centralized Insolvency Operati P.O. Box 7346 Philadelphia, PA 19101-7346

Navient P.O. Box 9500 Wilkes Barre, PA 18773

Seterus, Inc. Attn: Bankruptcy Department P.O. Box 1047 Hartford, CT 06143-1047